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CONFIRMATION NO. 8432

<b>SERIAL NUMBER</b> 09/589,387	<b>FILING OR 371(c) DATE</b> 06/07/2000 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3739	<b>ATTORNEY DOCKET NO.</b> 0G-040016US
<b>APPLICANTS</b> Graydon Ernest Beatty, St. Paul, MN; Jonathan Kagan, Minneapolis, MN; Jeffrey Robert Budd, St. Paul, MN;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 08/387,832 05/26/1995 PAT 6,240,307 which is a 371 of PCT/US93/09015 09/23/1993 which is a CIP of 07/950,448 09/23/1992 PAT 5,297,549 and is a CIP of 07/949,690 09/23/1992 PAT 5,311,866				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 08/01/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 3
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 67337				
<b>TITLE</b> METHOD FOR MAPPING POTENTIAL DISTRIBUTION OF A HEART CHAMBER				
<b>FILING FEE RECEIVED</b> 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	